Please type a plus sign (+) inside this box Under the Paperwork Reduction Act of 1995, no		U.S. Patent and Trademark	PTO/SB/21 (08-00) d for use through 10/31/2002. OMB 0651-0031 c Office: U.S. DEPARTMENT OF COMMERCE nation unless it displays a valid OMB control number.				
*		Application Number	09/993,670				
TRANSMITTAL FORM		Filing Date	November 27, 2001				
FORM		First Named Inventor	Song Han				
(to be used for all correspondence after in	nitial filing)	Group Art Unit	2183				
		Examiner Name	Meng An				
Total Number of Pages in This Submission	4	Attorney Docket Number	19111.0053				
	ENCLO	OSURES (check all that apply)					
Fee Transmittal Form	Statem Status	ent Claiming Small Entity	After Allowance Communication to Group				
Fee Attached	☐ Drawin	g(s)	Appeal Communication to Board of Appeals and Interferences				
Amendment / Response	Licensi	ng-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)				
After Final		n Routing Slip (PTO/SB/69) ccompanying Petition	Proprietary Information				
Affidavits/declaration(s)	_	n to Convert to a onal Application	Status Letter				
Extension of Time Request		of Attorney, Revocation e of Correspondence Address	Other Enclosure(s) (please identify below):				
Express Abandonment Request	Reque	al Disclaimer st for Refund ımber of CD(s)	Petition for Revival of an Application for Patent Abandoned for Failure to Notify the Office of a Foreign or International Filing				
Certified Copy of Priority Document(s)	Certified Copy of Priority		International Filing				
Response to Missing Parts/ Incomplete Application							
Response to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm or Individual name Michael A. Schwar	tz, Reg. No.	40,161					
Signature Man XIII V	'	blund.					

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name

Signature

Date

CERTIFICATE OF MAILING

Date

May 29, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED

JUN 0 2 2003

OFFICE OF PETITIONS



FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT 1,300

	Complete if Kno	own
Application Number	09/993,670	
Filing Date	November 27, 2001	
First Named Inventor	Song Han	RECEIVED
Examiner Name	Meng An	HECEIVED
Group / Art Unit	2154	JUN 0 2 2003
Attornov Docket No	19111 0053	

					UFFICE OF PEHLIONS							
METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued) 3. ADDITIONAL FEES							
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None					3. ADD		. FEES Small B	Entity				
Order Deposit Account:					Laige	Littly	Oman L	-1)(1()				
Deposit						Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Account	1	9-5127				l	1051	130	2051	65	Surcharge - late filing fee or oath	
Number					1052	.50	2052	25	Surcharge - late provisional filing fee or cover sheet.			
Deposit						1	1053	130	1053	130	Non-English specification	
Account Swidler Berlin Shereff Friedman, LLP				1812	2,520	1812	2,520	For filing a request for reexamination				
Name The Commiss	L ioner i	s autho	rized t	o: (check all	that anniv)	J	1804	920°	1804	920*	Requesting publication of SIR prior to Examiner action	
☑ Charge fee(s) indic	cated be	elow 🛭	☑ Credit any		าก	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
Charge fee(1251	110	2251	55	Extension for reply within first month	
to the above-id	entified	deposi	it accou	ınt.			1252	410	2252	205	Extension for reply within second	
		FE	E CAL	CULATION			1				month	
1. BASIC	FIL INC	FFF					1253	930	2253	465	Extension for reply within third month	
Large Entity	Sma	all Entity	-				1254	1,450	2254	725	Extension for reply within fourth month	
Fee Fee Code (\$)	Fee Code	Fee e (\$)	· <u></u>	e Description	! Fee Paid		1255	1,970	2255	985	Extension for reply within fifth month	
1001 750	2001			ility filing fee	1007410	7	1401	320	2401	160	Notice of Appeal	
1001 730	2001		-	esign filing fee	-	-	1402	320	2402	160	Filing a brief in support of an appeal	
1002 530	2002			ant filing fee	ļ	-	1403	280	2403	140	Request for oral hearing	
1004 750	2004	375	5 Re	eissue filing fee			1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1005 160	2005	80	Pro	ovisional filling	fee		1452	110	2452	55	Petition to revive – unavoidable	
		SURT	OTAL (1	1)	(\$) 0	_	1453	1,300	2453	650	Petition to revive – unintentional	1,300
			J 1742 (·,	[_(\psi) \cdot		1501	1,300	2501	650	Utility issue fee (or reissue)	
2. EXTRA CL	NM FE	ES					1502	470	2502	235	Design issue fee	
					ee from Fee		1503	630	2503	315	Plant issue fee	
Total Claims		**	= 0		elow Paid	\neg	1460	130	1460	130	Petitions to the Commissioner	
			- ⊨	==== ^ =		≓	1807	50	1807	50	Processing fee under 37 CFR 1.17 (g)	
Independent Claims		- **	= 0	×	= 0		1806	180	1806	180	Submission of Information Disclosure Stmt	
Multiple Dependent				x [= 0		8021	40	8021	40	Recording each patent assignment per property (times number of	
Large Entity.		Small E									properties)	
Fee Fee Code (\$)	0	ee ode	Fee (\$)	Fee Descrip	otion		1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	1
1202 18		202	9	Claims in ex	cess of 20		1810	750	2810	375	For each additional invention to be	1 1
1201 84		201	42	•	claims in excess of 3						examined (37 CFR § 1.129(b))	
1203 280	T	203	140		endent claim, if not pa ndependent claims ov		1801	750	2801		Request for Continued Examination (RCE)	
1204 84	2	204	42	original pate	nt		1802					
1205 18 2205 9 "Reissue claims in excess of 20 and over original patent									of a design application			
				- 1		7	Other fe	e (specif	y)			
SUBTOTAL (2) (\$) 0					l							
<u> </u>					*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 1,300							
**or number previously paid, if greater: For Reissues, see above												

SUBMITTED BY Complete (if applicable)							
Name (Print/Type)	Michael A. Schwartz	Registration No. Attorney/Agent)	40,161	Telephone	202/424-7500		
Signature	muchuel a.	Schume		Date	May 29, 2003		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231. If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND									
1 Date of Request: 07/21/03 2 Serial/Patent # 09/993,670									
3 Please refund the following fee(s):				R ER	5 DATE FILED	6 AMOUNT			
	Filing					\$			
	Amendment					\$			
	Extension of Time					\$			
	Notice of Appeal/Appeal					\$			
X	Petition		4		5/29/03	\$ 1300.00			
	Issue					\$			
	Cert of Correction/Terminal Disc	c.				\$			
	Maintenance					\$			
	Assignment					\$			
	Other					\$			
			7 TOTAL AMOUNT S 1300.			\$ 1300.00			
		8	8 TO BE REFUNDED BY:						
10 RE	ASON:		Treasury Check						
	Overpayment		χ	C	redit Dep	osit A/C #:			
	Duplicate Payment 9 1 9 5 1 2 7								
· X	No Fee Due (Explanation):								
fex	ind filed same day as PCt								
11 REFUND REQUESTED BY:									
ТҮРІ	ED/PRINTED NAME: Paul Shanoski		TITLE: Attorny						
SIG	SIGNATURE: faul Shanosh. PHONE: 305-0011								
OFFICE: Ma of Petitions									
THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: DATE: 7/30/13									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B